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23117 7590 02/27/2004

NIXON & VANDERHYE, PC
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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/913,524	08/15/2001	Andrew N. Shelling	3911-10	9590

TITLE OF INVENTION: DIAGNOSIS OF PREMATURE OVARIAN FAILURE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$0	\$1330	05/27/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
JOHANNSEN, DIANA B	1634	435-006000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Nixon & Vanderhye

2 _____

3 _____

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(A) NAME OF ASSIGNEE

Auckland Uniservices Limited

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Auckland, New Zealand

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☐ corporation or other private group entity ☐ government

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☒ Issue Fee☐ Publication Fee☒ Advance Order - # of Copies 4

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Leonard C. Mitchell, Reg. #29,009 05/27/2004

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